UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY

| In re: | Case No. 12-15062 |
|---------------|-------------------|
| JUAN R FRED | |
| CARMEN L FRED | |
| Debtor(s) | |
| | |

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Marie-Ann Greenberg, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 02/29/2012.
- 2) The plan was confirmed on 07/30/2012.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on 12/14/2012.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 09/20/2012, 11/09/2016.
 - 5) The case was dismissed on $\underline{12/14/2016}$.
 - 6) Number of months from filing to last payment: <u>57</u>.
 - 7) Number of months case was pending: 61.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: \$13,533.00.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$115,210.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$115,210.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$3,414.25
Court Costs \$0.00
Trustee Expenses & Compensation \$6,093.84
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$9,508.09

Attorney fees paid and disclosed by debtor: \$3,500.00

| Scheduled Creditors: | | | | | | |
|--------------------------------|-----------|------------|------------|------------|------------|------|
| Creditor | | Claim | Claim | Claim | Principal | Int. |
| Name | Class | Scheduled | Asserted | Allowed | Paid | Paid |
| CHASE BANK USA | Unsecured | 462.00 | NA | NA | 0.00 | 0.00 |
| FEDERAL NATIONAL MORT GAGE . | Unsecured | NA | 220,929.91 | 220,929.91 | 0.00 | 0.00 |
| FEDERAL NATIONAL MORT GAGE . | Secured | 118,888.80 | 118,888.00 | 118,888.00 | 105,701.91 | 0.00 |
| FOCUS RECEIVABLES MANAGEMEN | Unsecured | 20,304.00 | NA | NA | 0.00 | 0.00 |
| IRS | Priority | 498.00 | NA | NA | 0.00 | 0.00 |
| JP MORGAN CHASE BANK | Unsecured | 27,549.00 | 25,645.28 | 25,645.28 | 0.00 | 0.00 |
| MARCAM ASSOCIATES | Unsecured | 313.00 | NA | NA | 0.00 | 0.00 |
| MCS CLAIM SERVICES, INC. | Unsecured | 1,400.00 | NA | NA | 0.00 | 0.00 |
| MET ABNK/FHUT | Unsecured | 1.00 | NA | NA | 0.00 | 0.00 |
| NORTH JERSEY PATHOLOGY LLC | Unsecured | 452.00 | NA | NA | 0.00 | 0.00 |
| ST JOSEPHS REGIONAL MED CTR | Unsecured | 125.00 | NA | NA | 0.00 | 0.00 |
| ST JOSEPHS REGIONAL MED CTR | Unsecured | 75.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALTHCARE | Unsecured | 100.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALT HCARE | Unsecured | 100.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALTHCARE | Unsecured | 150.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALTHCARE | Unsecured | 200.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALTHCARE | Unsecured | 50.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALTHCARE | Unsecured | 313.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S HEALT HCARE | Unsecured | 218.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPHS REGIONAL MEDICAL (| Unsecured | 1,572.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPHS REGIONAL MEDICAL (| Unsecured | 1,780.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPHS REGIONAL MEDICAL (| Unsecured | 1,400.00 | NA | NA | 0.00 | 0.00 |
| ST. JOSEPH'S REGIONAL MEDICAL | Unsecured | 100.00 | NA | NA | 0.00 | 0.00 |

| Summary of Disbursements to Creditors: | - | - | |
|--|--------------|--------------|----------|
| | Claim | Principal | Interest |
| | Allowed | <u>Paid</u> | Paid |
| Secured Payments: | | | |
| Mortgage Ongoing | \$118,888.00 | \$105,701.91 | \$0.00 |
| Mortgage Arrearage | \$0.00 | \$0.00 | \$0.00 |
| Debt Secured by Vehicle | \$0.00 | \$0.00 | \$0.00 |
| All Other Secured | \$0.00 | \$0.00 | \$0.00 |
| TOTAL SECURED: | \$118,888.00 | \$105,701.91 | \$0.00 |
| Priority Unsecured Payments: | | | |
| Domestic Support Arrearage | \$0.00 | \$0.00 | \$0.00 |
| Domestic Support Ongoing | \$0.00 | \$0.00 | \$0.00 |
| All Other Priority | \$0.00 | \$0.00 | \$0.00 |
| TOTAL PRIORITY: | \$0.00 | \$0.00 | \$0.00 |
| GENERAL UNSECURED PAYMENTS: | \$246,575.19 | \$0.00 | \$0.00 |

| Disbursements: | | |
|---|----------------------------|---------------------|
| Expenses of Administration Disbursements to Creditors | \$9,508.09 \$105,701.91 | |
| TOTAL DISBURSEMENTS : | | <u>\$115,210.00</u> |

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 04/06/2017

By: /s/ Marie-Ann Greenberg

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.